



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Public Comment Request;

COVID-19 Provider Relief Fund (PRF) and American Rescue Plan (ARP) Rural Payment

Reporting Activities, OMB No. 0906-0068 – Revision

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on this ICR should be received no later than **[INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE *FEDERAL REGISTER*]**.

ADDRESSES: Submit your comments to paperwork@hrsa.gov or mail the HRSA Information Collection Clearance Officer, Room 14N136B, 5600 Fishers Lane, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email

paperwork@hrsa.gov or call Samantha Miller, the HRSA Acting Information Collection Clearance Officer at (240) 276-7189.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the information request collection title for reference.

Information Collection Request Title: COVID-19 Provider Relief Fund (PRF) Reporting Activities OMB No. 0906-0068 – Revision

Abstract: HRSA disburses the PRF and ARP Rural payments to eligible health care providers to support health care-related expenses or lost revenues attributable to the COVID-19 pandemic. Providers who have attested to the Terms & Conditions (T&Cs) regarding their PRF and ARP Rural payment(s), including the requirement that the provider "shall submit reports as the Secretary determines are needed to ensure compliance with conditions that are imposed on this Payment, and such reports shall be in such form, with such content, as specified by the Secretary in future program instructions directed to all recipients," will be using the PRF Reporting Portal to submit information about their use of PRF and ARP Rural payments. In anticipation of the approved OMB form (control number 0906-0068) expiring on January 31, 2023, HRSA is undergoing the revision of the ICR approval to include the ARP Rural reporting requirements and to allow for data collection beyond the January 31, 2023, expiration.

Need and Proposed Use of the Information: Recipients of a PRF and ARP Rural payment agreed to a set of T&Cs, which, among other requirements, mandate compliance with certain reporting requirements that will facilitate appropriate oversight of recipients' use of funds.

Information collected will allow for (1) assessing whether recipients have met statutory and programmatic requirements, (2) conducting audits, (3) gathering data required to report on findings with respect to the disbursements of PRF and ARP Rural payments, and (4) program evaluation. HRSA staff will also use information collected to identify and report on trends in

health care metrics and expenditures before and during the allowable period for expending PRF and ARP Rural payments.

Likely Respondents: PRF and ARP Rural payment recipients who have received more than \$10,000 in aggregate PRF and ARP Rural payments during one of the Payment Received Periods outlined below and that agreed to the associated T&Cs are required to submit a report in the PRF Reporting Portal during the applicable Reporting Time Period.

Reporting Period	Payment Received Period (Payments Exceeding \$10,000 in Aggregate Received)	Reporting Time Period
Period 1	April 10, 2020, to June 30, 2020	July 1, 2021, to September 30, 2021
Period 2	July 1, 2020, to December 31, 2020	January 1, 2022, to March 31, 2022
Period 3	January 1, 2021, to June 30, 2021	July 1, 2022, to September 30, 2022
Period 4	July 1, 2021, to December 31, 2021	January 1, 2023, to March 31, 2023
Period 5	January 1, 2022, to June 30, 2022	July 1, 2023, to September 30, 2023

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

Total Estimated Annualized Burden Hours:

Form Name	Number of Respondents	Number of Responses per Respondent	Total Responses	Average Burden per Response (in hours)	Total Burden Hours
PRF Reporting Portal, Reporting Period 1 (Providers who received payments April 10, 2020, to June 30, 2020)	126,831	1	126,831	5.6	710,254
PRF Reporting Portal, Reporting Period 2 (Providers who received payments July 1, 2020, to December 31, 2020)	120,536	1	120,536	4.2	506,251
PRF Reporting Portal, Reporting Period 3 (Providers who received payments, January 1, 2021, to June 30, 2021)	20,493	1	20,493	6.1	125,565
PRF and ARP Rural Reporting Portal, Reporting Period 4 (Providers who received payments July 1, 2021, to December 31, 2021)	51,622	1	51,622	5.6	287,514
PRF and ARP Rural Reporting Portal, Reporting Period 5 (Providers who received payments January 1, 2022, to June 30, 2022)	4,256	1	4,256	5.5	23,288
Total	323,738		323,738		1,652,872

HRSA specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Maria G. Button,
Director, Executive Secretariat.

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